

“Illinois Current Medicaid Telemedicine Landscape” Presentation Highlights May 9, 2018 Meeting

Legislative History:

In 2007, the Illinois Public Aid Code was amended to introduce telepsychiatry and to require HFS to reimburse psychiatrists and Federally Qualified Health Centers (FQHCs) delivering services through an “electronic medium.” In August of 2017, the Public Aid Code was further amended to remove the requirement that the Department require a physician or other licensed healthcare professional to be present in the room with the patient during the time that the patient is receiving services.

Administrative Rules:

Administrative rules governing telehealth services can be found at Title 89 Illinois Administrative Code Part 140.403. This rule sets requirements for the delivery of services, describes how providers are reimbursed and establishes record requirements. [89 140.403](#)

Fiscal Year 2017 Statistics:

- The predominant codes billed utilizing telemedicine technology include various levels of Office/Other Outpatient visits, psychiatric diagnostic evaluations and psychotherapy
- Just over \$400 thousand was spent on fee for service billings delivered through telehealth and \$93.2 thousand through Managed Care.
- Physicians were the top “distant provider” types utilizing telehealth, following by federally qualified health centers, nurse practitioners (in fee for service) and community mental health centers (in managed care.)
- Top originating providers were physicians, community mental health centers, federally qualified health centers, nurse practitioners and rural health clinics.